

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF NORTH DAKOTA

THE RELIGIOUS SISTERS OF  
MERCY, *et al.*,

*Plaintiffs,*

v.

ALEX M. AZAR, Secretary of the United  
States Department of Health and Human  
Service, *et al.*,

*Defendants.*

No. 3:16-cv-386

THE CATHOLIC BENEFITS  
ASSOCIATION; DIOCESE OF FARGO;  
CATHOLIC CHARITIES NORTH  
DAKOTA; and CATHOLIC MEDICAL  
ASSOCIATION,

*Plaintiffs,*

v.

ALEX M AZAR, Secretary of the United  
States Department of Health and Human  
Service, *et al.*,

*Defendants.*

No. 3:16-cv-432

**Declaration of** [REDACTED]

1. My name is Dr. [REDACTED] I am over 21 and capable of making this declaration pursuant. I have not been convicted of a felony or crime involving dishonesty. The facts herein are within my personal knowledge. If I were called upon to testify to these facts, I could and would competently do so.

2. I am a medical doctor and board-certified pediatrician. I earned my M.D. from the University of [REDACTED] Medical School and completed a residency in pediatrics at the Children's Hospital in [REDACTED] I served a year thereafter as the [REDACTED] of that program.

3. I am the sole owner of the medical practice called [REDACTED] in [REDACTED]

4. [REDACTED] provides a broad range of medical care to pediatric patients through my work and the work of others on our staff including a second pediatrician, two physician assistants, a family nurse practitioner, and others. Altogether, [REDACTED] has eighteen employees.

5. [REDACTED] receives payment for its services from various medical insurers, from self-funded employee health plans, from [REDACTED] from Medicaid, and from patients and their families. Our practice's ability to serve low income or indigent patients would be severely impacted if we were unable to receive compensation through Medicaid.

6. Our patients, almost all of whom are minors, come to us with a host of illnesses, injuries, and social and mental health issues. It is not uncommon that some—especially teenaged girls—report symptoms consistent with gender dysphoria. These patients sometimes seek to explore receiving puberty blockers, cross-sex hormones, and even one or more “top” or “bottom” surgeries. In our care of such patients, I have found it critically important to listen carefully to them, to encourage their parents compassionately to stay engaged and know their child's friends and social media practices. We have also had patients come to us with unwanted pregnancies.

7. I am a practicing Catholic. I am active in my parish and have served on the advisory board for our parish school. It is important to me to integrate my faith and Catholic values in all that I do, in my marriage and family, in my civic activities, in my care of patients, and in [REDACTED]. At [REDACTED] we practice medicine consistently with our Catholic values. I also am active in the Catholic Medical Association and currently serve both as its [REDACTED] and as a [REDACTED]. I do public speaking, often at a parish level, on how parents and families can integrate their Catholic faith into the healthcare they need.

8. [REDACTED] serves patients from birth through college and “does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.” See [REDACTED] website. Its nondiscrimination policy is grounded not only upon reason, but also upon the Catholic conviction that every single human being is made in the image and likeness of God and thereby possessed of intrinsic and inalienable dignity. It is further grounded in the Catholic belief that human beings are to love one another in the manner of Jesus Christ, and according to the model of the Good Samaritan who cares for the person in need strewn upon his path (*Lk* 10:29-37).

9. Catholic teaching opposes abortion because it is the taking of innocent human life.

10. Catholic teaching opposes transgender medicine because it contradicts God’s creative sovereignty and confounds human beings’ understanding of their own dignity as well as their development as body-soul unities. Catholics believe that as Creator, God does not place any human being in the “wrong body.” They also believe that God makes every human being; we do not make ourselves. Catholicism further teaches that God creates every human being as an inseparable unity of body and soul. Consequently, a human being’s failure to accept his or her bodily sex would impede self-understanding and development at the biological, physiological, emotional, mental and spiritual levels, all of which are interrelated.

11. Catholic beliefs as stated in the previous paragraph are consistent with scientific evidence that every person is either male or female and the fact that humans—like all mammals—are designed to produce gametes necessary for reproduction with males designed to produce sperm, and females to produce eggs. There is also a growing body of medical evidence concerning the uncertainties and risks associated with transgender medicine, especially when performed upon pediatric patients. That evidence demonstrates how transgender medicine leads to sterilization, impotence, loss of sexual satisfaction, and life-long medicalization. It also

documents: the virtual impossibility of obtaining genuine informed consent from pediatric patients regarding these consequences; how frequently its effects are irreversible and linked with suicidal ideation and suicides; and the growing number of patients requesting “detransitioning” on the grounds of their dissatisfaction with the effects of such medical interventions. Several European countries and medical establishments are currently retrenching their support especially for the performance of transgender procedures upon pediatric patients, on the basis of this evidence. Catholic values thus align with the core Hippocratic value of “first do no harm.”

12. Being required to pay for, perform, cover, or facilitate access to abortion or transgender medicine violates the overlapping professional and Catholic convictions of [REDACTED] about the proper medical care patients are owed. Professional and Catholic medical standards provide that healthcare should at the very least do no harm. It should aim to prevent or cure or at least alleviate a medical condition. It should not destroy or make dysfunctional a healthy bodily part or system. But transgender services do not meet these standards. They are *defined* by their destroying or making dysfunctional human body parts or systems. There does not exist sound evidence that they prevent or cure or alleviate the underlying medical conditions. It is also increasingly evident that it is virtually impossible to obtain genuine informed consent for transgender procedures from pediatric patients, who cannot be expected knowledgeably to agree to permanent future sterility, impotence, continuous medical treatment, and loss of sexual pleasure. There is growing evidence that transgender procedures lead to additional mental, psychological and physical harms. Consequently, transgender medicine cannot be said to meet either professional standards of medical care, or the additional standard observed by health care providers desiring to observe the central Catholic norm: to embody the healing ministry of Jesus Christ, at the physical, mental, and spiritual levels. *Ethical and Religious Directives for Catholic Health Care*, p. 6.

13. Any governmental regulation or policy requiring [REDACTED] to cover gender transition services and cross-sex hormones in its employee health plan or to perform such services or prescribe such drugs when it was competent to do so violates our deeply-held Catholic values and beliefs.

14. Without an exemption from the requirement to perform, cover, or facilitate access to abortion and transgender medicine, [REDACTED] Catholic values would be undercut in severe, ongoing, immediate, and irreparable manners. Catholics hold and teach that God is the sovereign Creator. This means that the human being is not self-made and never in “the wrong body.” Rather, the Book of Genesis states that after making humankind “male and female,” “in his image,” God “looked at everything he had made, and found it very good” (*Gen* 1: 27, 31). Were [REDACTED] to perform, pay for, cover, or facilitate access to abortion or transgender medicine, it would be powerfully communicating by word and deed to its employees, patients, and the public at large, that it no longer believed in God’s creative sovereignty, a central tenet of my faith.

15. [REDACTED] has been a member of the Catholic Benefits Association, without interruption, since 2017.

I declare under penalty of perjury that the statements herein are true and correct to the best of my knowledge.

Executed on the third day of May 2023, at [REDACTED]

[REDACTED]